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Bib Data Sheet

CONFIRMATION NO. 4484

SERIAL NUMBER 10/617,945	FILING DATE 07/14/2003  RULE	CLASS 052	GROUP ART UNIT 3635	ATTORNEY DOCKET NO.
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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 11/24/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 1	TOTAL CLAIMS 1	INDEPENDENT CLAIMS 1
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Verified and Acknowledged

Examiner's Signature: *[Signature]* Initials: *[Initials]*

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TITLE

Concealed elevated post base bracket

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